



UNL INTERAGENCY BILLING INVOICE

REMIT TO:

UNIVERSITY OF NEBRASKA-LINCOLN
INTERAGENCY BILLING # 512
P.O. BOX 880439
LINCOLN, NE 68588-0439

Invoice Number **90161036**

Page: 1 of 1

Invoice Date: 11/13/2018

Due Upon Receipt

BILLING ADDRESS:

Nebraska Emergency Management Agency
Attn: Deb Kai
2433 NW 24th Street
Lincoln NE 68524-1801

CUSTOMER/SHIP TO ADDRESS:

Item Number	Description of Charges	Amount
001	Financial assistance for Countering Violent Extremism	11,002.96

Led by Denise Bulling
Billing through 10/31/2018

approved for payments
Nikki Miller
11.29.2018
CVE #31240810

RECEIVED
NOV 14 2018
UNLACCOUNTSPAYABLE

Balance Due 11,002.96

Departmental Information:	
Campus Billing Dept.	SPONSORED PROGRAMS
Contact Name	Terri Murray
Phone	402-472-3112
Signature	<i>Terri Murray</i>

SAP Coding:		
SAP Cost Object	G/L Account	Amount
26-0116-0187-001	462102	11,002.96
Total		11,002.96

21900829



TO:

Nebraska Emergency Management Agency
Attn: Deb Kai
2433 NW 24th Street
Lincoln, NE 68524-1801

OFFICE OF SPONSORED PROGRAMS
2200 Vine St. - 151 Prem S. Paul Research Center
Lincoln, NE 68583-0861
FED ID # 47-0049123

AGREEMENT TITLE/CONTRACT NUMBER:

Financial Assistance for Countering Violent Extremism
#94263

INVOICE/REPORT: 2601160187-05

INVOICE PERIOD: 08/01/2018 to 10/31/2018

PAYMENT DUE: 12/13/18

REFERENCE NUMBER: 26-0116-0187-001

Directed by Denise Bulling

PLEASE REFERENCE ON REMITTANCE

ANALYSIS OF CLAIMED CURRENT AND CUMULATIVE COSTS

MAJOR COST ELEMENTS	AMOUNT FOR CURRENT PERIOD	CUM. AMOUNT FROM INCEPTION TO DATE
Salaries and Wages	\$0.00	\$0.00
Employee Benefits	\$0.00	\$0.00
Consumable Supplies	\$0.00	\$50.20
Travel-Domestic	\$128.30	\$2,504.39
Operating Expenses	\$8,664.66	\$49,216.06
Equipment	\$0.00	\$0.00
Indirect (26%)	\$2,210.00	\$12,911.45

Total Amount	\$11,002.96	\$64,682.10
--------------	-------------	-------------

Current period expenses \$11,002.96

NOTE: Payment due in 30 days - December 13, 2018

PLEASE REMIT A COPY OF THE INVOICE ALONG WITH THE PAYMENT TO ENSURE PROPER CREDIT.

"I certify that all expenditures reported (or payment requested) are for appropriate purposes and in accordance with the agreements noted above."

Terri Murray - Project Specialist

(402) 472-3112

tmurray2@unl.edu

Date:

November 13, 2018

UNFORM2 07-04

[illegible]

[illegible]

[illegible]